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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number
*10723619***APPLICATION AS FILED - PART I**

(Column 1) (Column 2)

| FOR | NUMBER FILED | NUMBER EXTRA |
|--|---|--------------|
| BASIC FEE (37 CFR 1.16(a), (b), or (c)) | | |
| SEARCH FEE (37 CFR 1.16(k), (l), or (m)) | | |
| EXAMINATION FEE (37 CFR 1.16(o), (p), or (q)) | | |
| TOTAL CLAIMS (37 CFR 1.16(l)) | minus 20 = | * |
| INDEPENDENT CLAIMS (37 CFR 1.16(h)) | minus 3 = | * |
| APPLICATION SIZE FEE (37 CFR 1.16(s)) | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | |

MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

| RATE (\$) | FEES (\$) | RATE (\$) | FEES (\$) |
|---------------|------------|---------------|------------|
| | <i>395</i> | | <i>790</i> |
| x <i>25</i> = | | x <i>50</i> = | |
| x <i>100</i> | | x <i>200</i> | |
| | | | |
| | <i>180</i> | | <i>360</i> |
| | | | |

TOTAL

TOTAL

APPLICATION AS AMENDED - PART II*1/3/06*

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|---|-------|---|------------------|
| Total (37 CFR 1.16(j)) | <i>16</i> | Minus | <i>20</i> | = |
| Independent (37 CFR 1.16(h)) | <i>1</i> | Minus | <i>3</i> | = |
| Application Size Fee (37 CFR 1.16(s)) | | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | |

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

| RATE (\$) | ADDITIONAL FEE (\$) | RATE (\$) | ADDITIONAL FEE (\$) |
|---------------|------------------------|---------------|------------------------|
| x <i>25</i> = | | x <i>50</i> = | |
| x <i>100</i> | | x <i>200</i> | |
| | | | |
| | <i>180</i> | | <i>360</i> |
| | | | |

TOTAL ADD'L FEE

TOTAL ADD'L FEE

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|---|-------|---|------------------|
| Total (37 CFR 1.16(j)) | * | Minus | ** | = |
| Independent (37 CFR 1.16(h)) | * | Minus | *** | = |
| Application Size Fee (37 CFR 1.16(s)) | | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | |

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

| RATE (\$) | ADDITIONAL FEE (\$) | RATE (\$) | ADDITIONAL FEE (\$) |
|---------------|------------------------|---------------|------------------------|
| x <i>25</i> = | | x <i>50</i> = | |
| x <i>100</i> | | x <i>200</i> | |
| | | | |
| | <i>180</i> | | <i>360</i> |
| | | | |

TOTAL ADD'L FEE

TOTAL ADD'L FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and, by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

03715124

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|----------------|--------------------------|
| TOTAL CLAIMS | 18 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 18 minus 20= * | 8 |
| INDEPENDENT CLAIMS | 1 minus 3 = * | 1 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

| SMALL ENTITY TYPE | OTHER THAN SMALL ENTITY |
|----------------------|----------------------------|
| RATE | FEES |
| BASIC FEE | 385.00 |
| OR | BASIC FEE 770.00 |
| X\$ 9= | |
| OR | X\$18= |
| X43= | |
| OR | X86= |
| +145= | |
| OR | +290= |
| TOTAL | 220 |
| OR | TOTAL |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|---------------------|----------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| OR | X\$18= |
| X43= | |
| OR | X86= |
| +145= | |
| OR | +290= |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------|------------------------|---------------------|------------------------|
| X\$ 9= | | X\$18= | |
| OR | | X86= | |
| X43= | | +290= | |
| OR | | TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------|------------------------|---------------------|------------------------|
| X\$ 9= | | X\$18= | |
| OR | | X86= | |
| X43= | | +290= | |
| OR | | TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.